PERINATAL SUBSTANCE ABUSE PREVENTION (PSAP) SUBCOMMITTEE MINUTES October 5, 2006

SUBCOMMITTEE MEMBERS PRESENT

Maggie Carlton, Senator John Hiatt, Ph.D. Charlene Herst Colleen Morris, M.D. T.J. Rosenberg

Maria Canfield, Chief, Bureau of Alcohol and Drug Abuse (BADA)

Susan Gonzales, Ph.D.

SUBCOMMITTEE MEMBERS ABSENT

Terrence McGaw, M.D. Candice Kidd Janie Lowe Beverly Neyland, M.D.

STATE HEALTH DIVISION STAFF PRESENT

Judith Wright, Chief, Bureau of Family Health Services (BFHS) Muriel Kronowitz, Perinatal Substance Abuse Prevention (PSAP) Coordinator, BFHS Tami Tersteege, Administrative Assistant 4, BFHS

OTHERS PRESENT

Lorraine Vazquez, Parent, RMHC Jennifer Donaldson, Westcare Meghan Dole, Westcare Ioan Talfryn, M.D. University of Nevada School of Medicine (UNSOM)

CALL TO ORDER

Senator Maggie Carlton called the Perinatal Substance Abuse Prevention (PSAP) Subcommittee meeting to order at **9:10 a.m.** The meeting was videoconferenced at the Legislative Counsel Bureau (LCB), 401 South Carson Street, Room 2134, Carson City, Nevada, and the Grant Sawyer State Building, 555 East Washington Boulevard, Room V4406, Las Vegas, Nevada. This was a public meeting, and the public was invited to make comments. In accordance with the Open Meeting Law this meeting was posted at the following locations: Bureau of Family Health Services (BFHS), Carson City; Kinkead Building, Carson City; Nevada State Library and Archives, Carson City; Washoe County District Health Department (WCDHD), Reno; Elko County Library, Elko; LCB, Carson City; Grant Sawyer State Building, Las Vegas; and the Health Divison Website: www.health2k.state.nv.us.

Introductions were made around the table.

APPROVAL OF MINUTES FROM MEETING OF MARCH 14, 2006

Dr. Colleen Morris moved to approve the March 14, 2006 minutes. Charlene Herst seconded. **MOTION APPROVED**

PSAP SUBCOMMITTEE CO-CHAIR REPORT

Senator Carlton stated the letter to the Legislative Health Care Subcommittee with recommendations from the previous meeting was not sent. Senator Carlton made the recommendations verbally and did not have the opportunity to go over all of them. She noted she is not sure how many of the PSAP subcommittee recommendations have been incorporated into the Legislative Health Care Subcommittee final report until it is available. She will have to wait until after the elections in November to see who is on the committee, what agenda items will be addressed, what direction the committee will take, and how the budget issues will be handled.

INTRODUCTION OF NEW PSAP COORDINATOR

Senator Carlton introduced and welcomed Muriel Kronowitz, PSAP Coordinator. Ms. Kronowitz shared she had extensive experience working with Fetal Alcohol Spectrum Disorders (FASD) and other drug related issues during pregnancy. She stated her focus and passion is working on intervention and prevention so that future generations are healthy. Ms. Kronowitz noted she previously was the Coordinator for the Family Care Court in Anchorage, Alaska which dealt with moms who had their children removed as a result of alcohol and drug issues. Her graduate work specialization was in substance abuse as well as mental health.

PSAP COORDINATOR REPORT

Ms. Kronowitz stated the Needs Assessment has been passed on for further approval. She had been working with Dr. Susan Gonzales, Eryn Branch, and Barbara Caskey from the Bureau of Alcohol and Drug Abuse (BADA), on the FASD five year strategic plan and the BADA five year strategic plan. A draft will be distributed to members soon. Ms. Kronowitz stated she is looking for potential funding streams from the federal and state level, and foundations.

SUBCOMMITTEE DISCUSSION AND POSSIBLE APPROVAL OF THE PSAP NEEDS ASSESSMENT

Ms. Kronowitz stated the Needs Assessment had circulated several times since she had been on board in terms of feedback and editing. Ms. Herst stated she had found spacing and name issues to correct. Maria Canfield stated how exciting the document is and gave kudos to those who worked on it. Dr. Morris echoed Ms. Canfield's statement. Senator Carlton suggested on page 27, under Problem Statement 3 FASD Education and Diagnosis, to change "may be" on the second heading to "is" so it reads "Nevada is at heightened vulnerability for children born with an FASD". Ms. Herst stated her appreciation of the inclusion of tobacco effects, not only of first hand smoke but also of the effects of second hand smoke on the fetus. Dr. Hiatt motioned to except the 2006 Needs Assessment with corrections made. Dr. Morris seconded. MOTION APPROVED

SUBCOMMITTEE RECOMMENDATIONS FOR POSSIBLE BILL DRAFT REQUESTS TO BE PRESENTED AT THE NEXT LEGISLATIVE SESSION

Senator Carlton stated she had open Bill Draft Requests (BDR) still available to those interested in submitting something to the legislature. She noted Senator Valerie Wiener is on task with the Social Hosting Bill which is basically for problems associated with parents who host parties and allow underage drinking. Dr. John Hiatt asked how many legislators have been apprised of the information on the town hall meeting, which had powerful statements from actual individuals who encounter FASD problems. He stated that if legislators know of the problems encountered there would be a greater possibility of funding to work on the issues. Senator Carlton stated the best time to inform legislators would be after the November elections. She suggested writing a synopsis of the town hall meeting and create a list of parents who attended who could contact their legislators.

Lorraine Vazquez stated she is present because she was impressed with the Town Hall meeting proposal. She stated she is on the Rural Mental Health Consortium and would like to inform other mental health consortiums in the state of this subcommittee and what is being done on FASD. Dr.

Morris indicated the Bureau of Family Health Services (BFHS) funds a FASD diagnostic clinic in Las Vegas with individuals from Reno flying to Las Vegas for services. The clinics have been successful in obtaining feedback from these parents stating their children had better educational and mental health services after going through the diagnostic process. The families also obtain recommendations for behavioral and medical treatment as well as educational interventions. The funding is for 10 clinics per year but could use 40 clinics in Las Vegas. Funding is also an issue in setting up clinics based in Reno. Dr. Morris suggested the committee consider a BDR for the school districts that addresses the provision of tools needed by teachers, social workers and psychologists to serve the FASD population. Senator Carlton stated a way to address the Department of Education (DOE) is to rework the executive summary in the Needs Assessment and gear it towards the educational component and present the issue at one of their next meetings. Dr. Morris noted funding for the diagnostic clinics comes from BFHS Title V funds. Resources are very limited and perhaps a separate appropriation could be developed for statewide clinics to include the north including Elko. Judy Wright stated the proposal could be for a pilot which, if successful, could lead to additional funding. Ms, Canfield asked if children who are diagnosed with FASD fall under the definition of Serious Emotional Disturbed (SED), which is the target population of the Division of Child and Family Services (DCFS). T.J. Rosenberg stated her son, who has FAS, was treated through DCFS and was considered SED. Ms. Canfield suggested bringing in Susan Mears from DCFS to partner with because she is working with the local mental health consortium in developing and redesigning a plan that serves kids in need. Senator Carlton stated the Mental Health Consortium recommendations are already posted on their website. Clark County is also providing recommendations for Child Haven. Dr. Hiatt stated a two prong approach is needed: one dealing with the existing problems and the other on prevention. Dr. Hiatt noted he would like to see the cooperation of radio and television media informing the public of the dangers of alcohol and drug use during pregnancy. Physicians do not understand that alcoholism is a disease and would need to get educated. Dr. Morris stated a tool kit for OBGYN's had been developed by the American College of Gynecology (ACOG) and involves screening for alcohol use with every woman who has a prenatal visit and provides alcohol education. Studies have shown women who are given the information early in their pregnancy will make an effort to change their behavior to protect their fetus. Ms. Wright stated Dr. Terrence McGaw is the past chairperson of the Nevada ACOG and it would be best to go through him to obtain the tool kits. Dr. Morris stated kits will be provided for free and should be obtained for the public health nurses as well.

Dr. Morris volunteered to do a report on FASD diagnostic clinic which would include the cost to run the clinic, who had been involved, what the outcomes have been and how many individuals are on the waiting list. Ms. Wright stated the report will be an action item on the next agenda. Senator Carlton stated recommendations for possible bill drafts would be tabled until the following meeting after the election. **ACTION TABLED**

PSAP BYLAWS FORMAT CHANGE AND ADDED DISCLAIMER TO BRING THEM INTO COMPLIANCE WITH THE DEPARTMENT OF HEALTH AND HUMAN SERVICES

Senator Carlton stated a representative of the Attorney Generals office did a presentation at the latest Maternal and Child Health Advisory Board (MCHAB) meeting and explained the disclaimer is voluntary. What they are trying to do is give the public as much information as possible and asking to be careful about disclosing health information before making decisions which might financially benefit someone connected with the subcommittee. Ms. Herst moved to approve the document. Dr. Morris second. **MOTION APPROVED**. Senator Carlton opposed.

SUBCOMMITTEE RECOMMENDATIONS TO STAFF

Senator Carlton noted the necessity for staff to find out when the next DOE meeting is and for the committee to figure out how to address the concerns with the DOE. Dr. Morris stated there are two issues which need to be considered to discuss. One is best practices of treatment for children who have FASD in terms of educational intervention; the other is general education and prevention surrounding the issue of FASD. There is a curriculum available for kindergarten to high school developed by the National Organization on Fetal Alcohol Syndrome (NOFAS) that one of the school districts could be interested in piloting. Senator Carlton stated the first meeting with DOE and the subcommittee would focus on education and information. The presence of parents and kids affected by FASD would be important in making an impact on the DOE.

PUBLIC COMMENT AND DISCUSSION

Dr. Morris noted the health tool kit used for screening would provide prevention opportunities with health care providers to discuss drinking and reproduction as well as brief intervention. To obtain more information on the NOFAS curriculum go to www.nofas.org. She also stated the Centers for Disease Control and Prevention (CDC) put out the definition standards for Classic FAS and for Partial FAS that includes information about how to diagnose alcohol related neurological developmental. Dr. Gonzales informed Dr. Hiatt the FASD Centers for Excellence has a power point presentation which covers the basics on FASD. Also available at no cost, is a video or DVD titled "Recovering Hope" and deals with mothers who drank while pregnant, discovering what went wrong and dealing with it. Dr. Hiatt stated if every member of the legislature could see the video it would go a long way towards convincing them of the problems on FASD in Nevada.

The next meeting will be on Thursday November 30, 2006.

Meeting adjourned at 10:30 a.m.